Message From The President

Caryn Bing
NVSHP President

I would like to extend summer greetings to all the NVSHP members. Summers in Nevada can seem drawn out, hot, and unproductive. I am pleased to report that NVSHP is none of these things. Your organization is engaged on a number of fronts, actively participating in state and national events impacting pharmacy practice. In fact, we have so much to do that the summer may get away from us before we know it. So what’s been happening? To kick off the season, your ASHP delegates (Robert Long and I) represented Nevada at regional delegates conferences in Phoenix and Chicago. Then we attended the Summer Meeting and House of Delegates (HOD) in Tampa, FL. The HOD considered 27 new policy statements covering a wide range of issues. There was lively discussion and consideration at several key delegate caucuses, and very active input to the proposed policies. 14 were amended by the HOD in a marathon Sunday afternoon session. Please check out the PDF document on the ASHP Web site for the complete set of new policies, including the new Minimum Hiring Standards for Pharmacy Technicians.

Long before the heat of summer, the NVSHP Education Committee was deep into the planning for this year’s Annual Meeting, Establishing Excellence in NV Pharmacy Practice scheduled for October 22-23 at the Green Valley Ranch in Las Vegas. I am pleased to report that ASHP Immediate Past President Lynnae Mahaney will be a keynote speaker on the topic of medication safety. Please mark your calendars now to plan for a day plus of CE and professional networking. Potential exhibitors and sponsors can refer to the NVSHP web site for a prospectus. Member and non-member pharmacists, technicians and students will want to keep an eye out for registration information in August. In addition, we are working on several late-summer educational events in Northern and Southern NV. Watch for announcements for free live CE for NVSHP members.

NVSHP is one of less than 10 state ASHP affiliates selected to participate in the pilot state affiliation process review. The Executive Committee of the NVSHP Board will submit our application in August for continued ASHP state affiliate status. The NVSHP Board and I view this invitation-only pilot activity as a chance to take stock of the activities that we have been involved with; it also provides us an opportunity to identify areas that we should increase our focus on to ensure that NVSHP members receive the most benefit from the state affiliate status with ASHP.

NVSHP continues to send representatives to the NV Board of Pharmacy meetings in order to keep abreast of and potentially advise on issues affecting health-system pharmacy.

So as you can see, summer is not a slow time for key pharmacy issues in Nevada. I continue to call on all members (and potential members) to get involved in some way. Join a committee; chair a committee; volunteer to help with the annual meeting on site; help to recruit at least one new member to NVSHP; consider running for one of the board positions for 2011.

While you are staying cool in this mid-summer heat throughout the state, keep this in mind: Your association needs your active engagement to ensure that it continues to grow, thrive, and truly reflect the needs and abilities of all the members.

I, along with the NVSHP Board, welcome your feedback and participation.

Regards,

Caryn Bing
Economic Outlook for Health-System Pharmacists

By: Jennifer Mungcal, BSc AM, PharmD Candidate, USN class of 2011

With the national unemployment rate at 9.5% (June 2010), Nevada is ranked the number one state highest in unemployment with an unemployment rate of 14% as of May 2010.1 Within a span of 30 months, unemployment in Nevada has risen from 5.3% in January of 2008 to 14% in June of 2010.2 An increasing worry regarding unemployment from both the public and private pharmacy sectors is prevalent, especially in Nevada, but there appears to be data supporting the fact that there should be no worry at all. Although Nevada’s unemployment rate is at an all-time high, drastically increasing since 2008, unemployment does not seem to be affecting the pharmacy industry. According to the Bureau of Labor Statistics (BLS), pharmacist’s employment outlook is growing at a ‘faster than average’ rate meaning that between the years 2008 and 2018 employment should increase by about 17% throughout the United States.1 Employment outlook is also stated as ‘excellent’ meaning that job prospects for pharmacists are more numerous than actual job seekers.1

An aggregate demand index (ADI) was published by the Pharmacy Manpower Project in April 2010 stating that Nevada had an ADI of 2.63 with 3 defined as demand equal to supply.3 This number falls closer to the definition that the demand is balanced with supply of pharmacists as opposed to the demand being less than available pharmacist supply.3 An interesting statistic to keep an eye on would be the fact that the average age of the pharmacist is gradually increasing. From 2000 to 2009, pharmacist’s age (those less than 40 years of age) decreased from 44.1% to 24.4%, while 16.7% and 32.5% over the age of 55 increased.5 This interpretation is important to note due to the fact many pharmacists over the age of 60 have either remained in the field or had retired and returned back to work after being affected by the economic recession between December 2007 and August 2009.5 This may be an important detail with respect to new graduates and available positions.

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Legislative Update

The Legislative Committee is currently involved in active surveillance of Board of Pharmacy, State, and Federal legislative issues that will have an impact on the membership of NVSHP. The State Legislature is currently gearing up for the 2011 Session. In the interim, members of the committee review meetings of the Legislative Committee on Health Care. Bill Draft Requests for the 2011 Session are currently being submitted. The Legislative Committee will be reviewing these proposals for any issues impacting the membership of NVSHP.

Similarly, members of the Legislative Committee are committed to attend BOP meetings in both Las Vegas and Reno to provide active representation of NVSHP on any issues pertaining to health-system pharmacy. Additionally, members of the Legislative Committee take part in quarterly ASHP State Legislative Affiliate conference calls to share ideas, issues, and solutions with other state affiliates of ASHP.
Institutional Highlight:
Renown Regional Medical Center
By: Adam Porath, PharmD, BCPS

Renown Regional Medical Center is an 808-bed tertiary care facility located in Reno. Renown Regional is the only trauma center between Sacramento, California and Salt Lake City, Utah. As such, Renown Regional routinely receives patient transfers from outlying facilities in bordering areas California, Oregon, Idaho, as well as from throughout Northern Nevada. Renown Regional has received a variety of accreditations and accolades including: certification as a Joint Commission Primary Stroke Center, Society of Chest Pain Centers Accreditation w/ PCI, American College of Surgeons Commission on Cancer Accreditation, and is part of the only Top 100 Integrated Health Network in Nevada.

The Department of Pharmacy at Renown Regional is led by Director Ronald Speizer, R.Ph. Ron recently joined the Renown team in June of 2010. Prior to coming to Renown, Ron worked as the EPIC Rx Application Manager for Sutter Health. Ron joins the management team of: Michael Fritz, R.Ph.- Pharmacy Manager, Alex Rassuchine, R.Ph., BCPS-Pharmacy Clinical Supervisor, Adam Porath, PharmD, BCPS-Pharmacy Clinical Coordinator, and Brenda Macy-Pharmacy Technician Supervisor.

The Department of Pharmacy at Renown Regional provides a variety of clinical and distributive services to a diverse inpatient and outpatient population. Clinical Pharmacy Satellites are located in the adult Critical Care units, Oncology, and Pediatrics. Pharmacy practice at Renown Regional involves a variety clinical activities including: a vancomycin/aminoglycoside dosing service, warfarin dosing service, phenytoin dosing service, parenteral nutrition service, renal dosing, and IV to PO conversion. Additionally, clinical pharmacists at Renown Regional are involved in the protocolized prescribing of a variety of agents including intravenous iron therapy, ESAs, and recombinant Factor VIIa.

Renown Regional has a long standing history of grooming pharmacy leaders in the State of Nevada. Renown has provided an ASHP accredited PGY1 program since 1992. Currently, Renown Regional supports three PGY1 residents and is in the process of developing a PGY2 Program in Critical Care.

Recently, the Department of Pharmacy has added three Pharmacy Clinical Specialists to add additional pharmacotherapy expertise. William “Zack” Marcus, Pharm.D., BCPS is the Critical Care Clinical Specialist at Renown Regional. Dr. Marcus is an integral member of the Trauma Critical Care Service rounding daily with the Trauma team. Through daily interventions and protocol development, Dr. Marcus has been able to demonstrate significant reductions in antibiotic cost and ICU days in the Trauma ICU.

Similarly, Jessica Thompson, Pharm.D., BCPS (Clinical Specialist, Infectious Disease) has provided Renown Regional’s Pharmacy team with additional expertise in antibiotic stewardship. While she has only been at Renown Regional for a year after completing her PGY2 Specialty Residency in Infectious Disease, Dr. Thompson has already been able to demonstrate significant reductions in antibiotic utilization and pharmacy expenditures. Dr. Thompson joins Michael Stander, Pharm.D., a clinical faculty member from Idaho State University in providing the patients at Renown with exemplary Infectious Disease Pharmacotherapy expertise.

The most recent addition of Clinical Specialists is Brian Vu, Pharm.D. who recently completed his PGY2 Specialty Residency at Mountain States Cancer Institute in Boise, Idaho. Dr. Vu is adding his Oncology expertise to an extremely busy Outpatient Infusion practice at Renown Regional. Additionally, Dr. Vu is responsible for pharmacy oversight to a busy Pediatric Oncology Specialty Clinic at Renown Children’s Hospital housed within Renown Regional.

Drs. Marcus, Thompson, and Vu are welcome additions to a clinical staff in the Department of Pharmacy. Renown Regional’s Department of Pharmacy is proud to boast eight Board Certified Pharmacotherapy Specialists and a Certified Geriatric Pharmacist. Our pharmacists are involved in a variety of multidisciplinary teams including Code Blue, Code STEMI, Integrated Blood Management, and Rapid Response. One example of this involvement is Gary Brooks, Pharm.D., BCPS. Dr. Brooks is very active member of ASPEN and provides his expertise in Nutrition Support as an integral member of the Tube Team and the Nutrition Support Team.

Just this month, the Department of Pharmacy at Renown Regional has expanded their clinical services to provide an Outpatient Anticoagulation Service to the patients in the Reno-Sparks area. Under the direction of Adam Porath, Pharm.D., BCPS and Karmen Kemmerer, Pharm.D, BCPS, the Outpatient Anticoagulation Service is staffed by pharmacists and a nurse practitioner providing much needed outpatient follow up to patients on chronic anticoagulation therapy in the community.
NVSHP Getting Involved in the Community

By: Tracie M. Balvanz, Pharm.D.

Last fall, NVSHP was contacted by Join Together Northern Nevada (JTNN) a substance abuse coalition that was looking for an opportunity to reach out to the pharmacy community about substance abuse related topics. At that time they were looking for our help engaging pharmacists in their first prescription drug round up. Unfortunately, the round up was held at the same time as our annual meeting, so we were unable to participate. A summary of the first prescription drug round up was featured in the winter newsletter.

I recently joined JTNN’s Community Prescription Roundup group and represent NVSHP and the Reno VA. At my first meeting I learned that the group was originally started in response to two grieving parents named Dave and Cathy whose son died at the age of 15. He was suspected to be opiate naive and died as a result of a methadone overdose (the corner suspected he took two 10mg tablets). They contacted JTNN and expressed the desire to keep this from happening to anyone else. In response to their request the Community Prescription Round Up group was organized and started to hold monthly meetings. I was amazed by the amount of work this group has been able to accomplish in 1 year including: obtaining sponsorship for C.E.’s to educate health care professionals on prescription drug use and abuse, educational sessions for children and their parents, public service announcements for the community, and organizing the first successful Prescription Drug Round Up (to name a few).

As a member of the Community Prescription Round Up group, I assisted in planning the most recent Prescription Drug Round Up held on April 24th 2010 at 5 locations in Washoe County. Each location was staffed by a uniformed law enforcement officer, at least two pharmacists, pharmacy technicians and several other volunteers. To say this event was a success would be an understatement! We collected almost 100,000 pills in 4 hours (2.5 times the amount collected in October). All the prescription medications collected were identified, counted, and catalogued by the pharmacists and technicians and then given to the Reno Police Department for incineration.

Personally, I am excited that JTNN sought out NVSHP’s involvement in this group. JTNN is planning for another Prescription Drug Round Up sometime this fall. JTNN’s ultimate goal is to someday have a statewide round up; I am encouraged that some of our members throughout the state of Nevada are actively engaged in seeing this accomplished. This is a great opportunity for our society to be more visible in our community and across the state. This also proved to be a great way to get pharmacists, pharmacy technicians, students and residents involved in community service.

I want to thank all the pharmacists and technicians who helped make the event a success. Specifically, I want to thank Adam Porath, Residency Director for Renown Hospital for giving his residents the day off so they could participate in this community service activity. I also want to thank the NVSHP members who volunteered their time to help out with the event: Jennifer Stathes, Kamie Christian and Rikki Rife.
Economic Outlook for Health-System Pharmacists

As of May 2009, the BLS reports that approximately 2,280 people are employed as pharmacists in the state of Nevada out of 43,770 of healthcare practitioner and technical occupations compared to the national average of 57,230 and 2,763,970, respectively. Although Nevada pharmacists represent only 3.98% of the national population of pharmacists, they remain a strong presence in the health care field in Nevada providing services such as medication dispensing, patient care services (such as outpatient Coumadin, lipid and newly-developing poly-pharmacy clinics), management, education and research. With hospital pharmacies providing unique services to patients, the role of pharmacist has changed dramatically in a 10 year span and in doing so has created a distinctive role filled only by the pharmacist. The demands of hospital pharmacists are gradually changing and will continue to do so as the technology and monetary resources become more easily attainable.

In a recent ASHP article, written by Cheryl Thompson, these demands are found to be accepted as pharmacists naturally prefer to spend more of their time with patients than dispensing. Although employment does look promising, it does appear that work schedules/hours, bonuses and retirement incentives have been altered with hopes of saving costs and maintaining employees. This may not be the most ideal for pharmacists, but employers are attempting to derive plans that will benefit the majority of their employees without having to pursue any unnecessary layoffs. Hospital pharmacists report less negative effects of their employment with regards to opportunities to take breaks, mental health and contact time with patients with respect non-hospital pharmacists (chain, supermarkets, independent, etc.). Hospital pharmacists spend 43% of their time dispensing medications and 27% of their time is devoted to patient services in comparison to the community pharmacy setting being 70% and 10%, respectively.

A study conducted in 2009 by the American Association of Colleges of Pharmacy (AACP) analyzed a total of 6,578 student responses based on an 87 question survey. Among the 6,578 students participating, 4,177 students plan on working for a chain pharmacy with only 1,718 students likely to choose a career in hospital pharmacy. This study also found that the majority(50.2%; 3,303 of 6,578) of the students did not have any additional plans of furthering their education. However, 1,433 students did plan on pursuing a pharmacy residency. This further establishes the idea that health-system pharmacists appear to have a steady job outlook. Approximately 22% of students attending pharmacy school at any given time are most likely to pursue a career in hospital pharmacy with the majority pursuing other areas of pharmacy. Students interested in pursuing a pharmacy residency should peruse the ASHP website and the residency directory which can be found at www.ASHP.org.

Employment in these hard economic times may be difficult to come by for most, but this does not appear to be true for pharmacists. While the general public may seem to be enduring the economic burden, pharmacists can rejoice in the fact that they are here to stay.

References
Professional Involvement After Graduation

By: Kate Miller, Pharm.D.

The transition from pharmacy school and/or residency can be both exciting and intimidating. With schooling finished, advancing a career often becomes the main focus of future goals. Throughout pharmacy school I was involved with and held positions in professional organizations. This provided me with time to collaborate with my classmates outside of the classroom as well as receive one on one time with professors that became mentors to me. My residency director, Dr. Okada, stressed the importance of continuing service in professional organizations as a way to connect with other professional pharmacists and help to advance the profession of pharmacy. When I came to Nevada to start my first clinical pharmacist position, the thought of volunteering my time outside of work seemed overwhelming. The question of what talents that I had to contribute as a new pharmacist held me back from becoming involved in Nevada Society of Health-System Pharmacists (NVSHP). Dr. Gary Brooks, chair of the NVSHP education committee, encouraged me at the beginning of the year to become part of the NVSHP education committee. I knew that I had a lot to learn and soon realized that by being part of the committee I could establish a network of accomplished professionals to accumulate knowledge from. My active involvement in the education committee started by doing small tasks such as putting together a member survey draft. I am now taking on larger roles such as securing industry exhibitors for the 3rd NVSHP Annual Meeting. These tasks have provided me with an education from my colleagues while allowing me to take on an increasingly active role in the committee. The members understand my experience limitations and are willing to offer their expertise to help me succeed. I have enjoyed collaborating through the education committee with pharmacists throughout the state in different practice settings and am inspired by the members insight and dedication to the pharmacy profession. I am starting to receive the same excitement and sense of accomplishment that I felt with organization involvement during pharmacy school. The work that is done by NVSHP is improving the pharmacy profession in Nevada and I would recommend becoming involved to any new practitioner. There is no prerequisite knowledge to joining a NVSHP committee, all that you need is a willingness to provide an extra set of hands and an open mind to learn. Contact a NVSHP leader today to become involved and make your future brighter!

Education Committee Communication

Dear Member/potential member,

I wanted to give a quick update on the progress of the Education Committee as we move full swing into summer. This year, we have a lot of new members on the committee which has provided a lot of positive energy for us to thrive off. We are currently working to plan our next annual meeting which will be held at the beautiful Green Valley Ranch Resort in Las Vegas this October 22nd and 23rd. We are very proud of the progress we have made and are excited about the quality topics and speakers we have lined up for your benefit. In addition to the annual meeting, we are working to bring additional CE and networking events to you soon. I would ask that you please take the time to check the NVSHP website and calendar of events frequently in the coming months to keep yourself up to date on the specific programs we are offering or are affiliated with. If you have interest in being more involved or possible serving a committee please contact me or any one of the board members via email (our email addresses are available on the NVSHP website).

I hope to see you in Las Vegas

Regards

Gary Brooks
NVSHP Education Committee Chair

Our Mission: The mission of the Nevada Society of Health-System Pharmacists is to advance and support the practice of pharmacy in the health-systems and serve as a collective voice on issues related to medication use and public health.
Wow! What a difference a year makes! This year’s meeting in Tampa was both hot outside and had hotly debated topics inside. One of the most heavily debated policies was on the topic of “Minimum Hiring Standards for Pharmacy Technicians”. This policy was made in response to the need for increased technician duties and responsibilities in support of the ASHP Pharmacy Technician Initiative.

In summary, the policy was developed by the Council on Workforce Development and encourages health-system employers to only hire technicians who have completed an ASHP accredited pharmacy technician training program and are PTCB certified. Furthermore, the hiring of pharmacy technician trainees would be supported only if the trainee is required to complete the ASHP pharmacy technician training program and, within 24 months of employment, obtain PTCB certification. Technicians not completing these requirements would be kept in positions of lesser responsibility until they fulfilled these requirements. Ongoing PTCB certification would be required for continued employment.

The debate in the Small and Rural Hospital Caucus focused on the time to complete both requirements. Initially, the policy was worded that both requirements were to be completed within 12 months of employment. The caucus concluded 12 months was too short of time to do both since some technicians may have to complete the schooling while employed, and that some accredited programs actually ran longer than 12 months. Secondly, this caucus recommended that ASHP expand the technician training programs to include a non-traditional distance learning program for technicians unable to travel long distances or for technicians wanting to complete these requirements at home. While at the annual meeting, the Veterans Health Administration made the announcement requiring passage of the PTCB exam as a condition for pharmacy technician employment.

The most controversial topic this year focused on the subject of medical marijuana. This topic was brought forward as a new business item by a delegate from New Jersey seeking ASHP’s guidance on this. As one could imagine, the ASHP’s House of Delegates floor soon took on the appearance of our nation’s House of Representatives with many delegates voicing their views on how pharmacists should deal with this issue. Fourteen states have passed medical marijuana legislation authorizing physician-supervised use of marijuana (including Nevada), but nothing regarding how marijuana is dispensed or legally procured by the patient. Nevada does have a marijuana tax stamp law enacted that mandates that those who possess marijuana are legally required to purchase and affix state-issued stamps onto his or her contraband. Failure to do so may result in a fine and/or criminal sanction. However, current U.S. Supreme Court laws state, “Doctors may not ‘prescribe’ marijuana for medical use under federal law, though they can ‘recommend’ its use under the First Amendment.” So as you can see, until the U.S. Supreme court finishes this debate and changes how the DEA should handle this controversy, it is unlikely that ASHP will be able to issue any guidance. This topic was referred back to the ASHP Board for further review and development by the Council on Pharmacy Practice.

In closing, I would like to thank everyone for the opportunity to represent NVSHP at the ASHP House of Delegates Summer Meeting. If anyone would like further information on ASHP policy, or topics passed at this year’s meeting please feel free to contact me at robertdlong24@yahoo.com or visit www.ashp.org/DocLibrary/Policy/HOD/OfficialLang2010Policies.aspx.
Save the Date:

NVSHP’s 3rd Annual Meeting will be held at the Green Valley Ranch Resort in Las Vegas this October 22nd and 23rd. If you are planning to spend the night or weekend, book early and use the promotional code “GCINHSH.”

NVSHP Exhibitor Prospectus

The NVSHP Annual Meeting is the place to be for companies, both large and small, that are interested in reaching Nevada pharmacy’s health-systems leaders. We will provide sponsorship opportunities to your company so you can reach our members. To view the NVSHP Exhibitor Prospectus, please visit our website at www.NVSHP.org.

Medication Drop-Off Event in Fallon, Nevada

Date: August 28th 2010  
Time: 8:00AM to 12:00 noon  
Place: City Hall Courtyard Fallon, Nevada  
Sponsors: Banner Churchill Community Hospital, NVSHP, Fallon Police Department, Churchill County Sheriff Department, Churchill County Coalition, Wal-Mart Pharmacy, The Medicine Shoppe, Walgreen’s Pharmacy

Calling All Pharmacy Technicians!

Do you want to expand your pharmacy technician experience? Have you ever thought of joining the NVSHP Technician Committee? You can participate in the shaping of educational and membership valued programs focused on Nevada’s health-system pharmacy technicians. You can help to advocate for legal and regulatory issues affecting pharmacy technicians. We meet one hour a month by conference call. If you are interested, contact Barbara Long, NVSHP Board of Directors Technician Member. If you are not already an NVSHP technician member, you can join today at www.nvshp.org.
Upcoming CE Events:

 Gauss: Advances in Stroke Prevention for Atrial Fibrillation
Speaker: William Dager Pharm.D., BCPS
Cost: free to members and $15 to non-members
**Fee will be waved if one becomes a new member onsite**
Look for additional information regarding this program to be emailed out soon. Also we will soon be including new information on the NVSHP web site under the continuing education page.

 Reno Date/Location: Las Vegas Date/Location:
Thursday, August 26th, 6:30-8:30p.m. Tuesday, August 24th, 6:30-8:30p.m
University of Nevada, Reno University Medical Center
Joe Crowley Student Union 2040 W. Charleston Boulevard
1664 N. Virginia Street, Room 402 2040 Building South Auditorium, 6th floor

 Gauss: Pharmacy Safety and Security
Speaker: Mark Gonzalez, Pharm.D.
Date/Location: TBA (October, 2010)
**Additional information will be posted on our website: www.NVSHP.com

Make sure to check out the HealthSystemCE website: www.healthsystemce.org
It’s a great source for news, information, and FREE CE!!!

Available CE Courses Include:
- Clinical Practice
- Acute Post-Operative Pain: Strategies for Management
- Antiplatelet Therapy Following Coronary Artery Stent Placement
- Botulinum Toxin--Update on Use in Movement Disorders
- Exploring Novel Treatment Options for Type 2 Diabetes
- Immunology and Rheumatoid Arthritis: the Role of Biologic Response Modifiers
- Respiratory Tract Infections-Hospital Acquired Pneumonia
- Treatment of Attention Deficit/Hyperactivity Disorder
- Understanding the Treatment Options in Post-Traumatic Stress Disorder
- Patient Safety and Joint Commission Topics
- Core Performance Measures - An Overview
- Medication Errors: A Focus on Patient Safety